|  |  |  |  |
| --- | --- | --- | --- |
| **ACCESS Health International, INC** | | | |
| **REQUEST FOR PROPOSAL OF CONTRACT** | | | |
|  | Name | | Dr. Habib Hasan Farooqui |
|  | Address | | B-64, Amar Colony, Lajpat Nagar-4, New Delhi 110024 |
|  | Legal Status of | | India |
|  | Country of Registration | | India |
|  | Registration Number | | NA |
|  | Date of Contract | | 25-Mar-22 |
|  | Completion of Contract | | 24-Sep-22 |
|  | Name of Point of Contact | | Shrikant |
|  | Contact No. / Email ID of Person to Contact | | 0000-0002-3081-2929, drhabibhasan@gmail.com |
|  | Name of the Project | | GLC-RF grant |
|  | Type of Contract | | AHI part time consultant contract |
|  | Grant Start Date | | August 2021 |
|  | Grant End Date | | July 2023 |
|  | Budget Line Item | | Consultant |
|  | Available Budget | | USD 500 per i.e. 7500 USD for a period of 15 days |
|  | Service/ Goods Description | | Technical facilitator for Surveillance theme of GLC |
|  | Name of Approver of Contract | | Dr. Reddy |
|  |  | |  |
| **Bank Details** | | | |
|  | Please make payment to |  | |
|  | Bank Name |  | |
|  | Account Number |  | |
|  | Bank Address |  | |
|  | IFSC Code |  | |
|  | Swift Code |  | |